



KHRC ADW-BT, 3-040-5 (11/2018)

## Kentucky Horse Racing Commission ADW Player Account Balance and Excise Tax Summary Report

Please print clearly and submit completed report by mail, fax, or email according to the dates found in instructions.

### Part I

Name of ADW Licensee: \_\_\_\_\_ Wagering Begin Date \_\_\_\_\_  
Affiliate Name: \_\_\_\_\_ Wagering End Date \_\_\_\_\_

### Part II Daily Average Sum of all Kentucky Account Holder Balances

\$ \_\_\_\_\_ -

### Part III Average Weekly Kentucky Excise Tax

\$ \_\_\_\_\_ -

### Part IV

I hereby certify that the information contained in this report is, to the best of my knowledge and belief, accurate and complete, and I understand that any material representations or omissions in this report subject me and my employer to all applicable penalties under KRS Chapter 230, 810 KAR, and any other applicable penalties available under Kentucky law.

\_\_\_\_\_  
Representative Name Title Telephone Number  
(Please Print)